PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER.THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE (37 CFR 1.16(a)) OR TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 = X \$ OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 1) (Column 3/ SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-FNH **PREVIOUSLY AFTER** EXTR/ TIONAL TION MENDMENT PAID FOR FEE FEE ENDMI Total Minus (37 CFR 1.16(c)) OR X \$ Minus OR X S FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + 5 TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) CLAIMS HIGHEST α REMAINING NUMBER PRESENT RATE ADDI-RATE ENT ADDI-AFTER AMENDMENT **PREVIOUSLY EXTRA** TIONAL TIONAL FEE PAID FOR FEE Total (37 CFR 1.16(c)) Minus ENDM OR Independent (37 CFR 1.16(b)) Minus X S = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Columni 2) (Column 3) CLAIMS HIGHEST \circ REMAINING PRESENT NUMBER RATE ADDI-RATE ADDI-ENDMENT TIONAL AFTER PREVIOUSLY **EXTRA** TIONAL AMENDMENT PAID FOR FEE Total (37 CFR 1.16(c)) Minus X \$ X \$ OR Minus = OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR = TOTAL TOTAL ADD'L FEE OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I										 -				
						Column 2)			SMALL ENTITY				OTHER THAN	
TOTAL CLAIMS			a		100	Coldina 21		TYPE		<u> </u>	ー OP	SMALL	ENTITY	
FOR			AUD 4050 50 50				.	RATE	FEE	4	RATE	FEE		
⊩			NUMBER FILED		NUMBER EXTRA		ļ	BASIC FE	E 385.00	OP	BASIC FEE	770.00		
╟─		ABLE CLAIMS	9 minus 20=		. 0		I	X\$ 9=		OR	X\$18=	_		
╟─	DEPENDENT (minus 3 =			0	_		X43=		OR	X86=		
L	ULTIPLE DEPE	NDENT CLAIM F	PRESENT]	Ī	+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2							2 .	L	TOTAL	+	OR		77/1	
	CLAIMS AS AMENDED - PART II										704	TOTAL	770	
_		(Column 1)	(Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER SMALL		
NTA	·	CLAIMS REMAINING AFTER		HIGHE NUMB PREVIO	ER USLY	PRESE			RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
N.	Total	AMENDMENT	<u> </u>	PAID F	OR			ŀ		FEE		1	FEE	
AMENDMENT	Total Independent	*	Minus	**		= '	_	L	X\$ 9=		OR	X\$18=	•	
₹.		ENTATION OF M	Minus OF MULTIPLE DEPENDENT				,	L	X43≃		OR	X86=		
									+145=		OR	+290=		
									TOTAL		OR	TOTAL		
		(Column 1)		(Calum)	~ 0\		- 0\	AD	DIT. FEE		JOH /	ADDIT. FEE		
		CLAIMS	T -	(Columi		(Colum	n 3)	_						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBE PREVIOU PAID FO	JSLY	PRESE! EXTR			RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total .	•	Minus	** .		u			X\$ 9=		OR	X\$18=		
A B	Independent .	•	Minus	***		=			X43=	·		X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEF	ENDENT C	LAIM			Н			OR	7.002		
											OR	+290=		
								ADI	TOTAL DIT, FEE		OR .	TOTAL ODIT, FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESEN EXTRA	π·	Γ		ADDI- TIONAL FEE	· . [RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X	\$ 9=		OR	X\$18=		
	Independent		Minus	***		3		H	(43=		F			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR _	X86=		
+145= OR +290=												.		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE TOTAL ADDIT. FEE OR ADDIT. FEE														
T	he. "Highest Numb	ber Previously Paid	For (Total or	Independent)	is the h	ighest nu	nber for	und i	n the appr	opriate box	in cotur	nn 1.		